# T 4020202021

## STATEMENT OF

FORM 1	ORGANIZATION			SECRETAR	Y OF THE SENATE
				14 JUL <sub>0</sub>	lica use dini 2: 07
1. NAME OF COMMITTEE (in		k if name inged)	Example: If typing, type over the lines.	12FE4M5	
Cory Booke	r for Senate			) }	
				1 1 1 1 1 1	
ADDRESS (number and	PO Box 32237		! ! ! ! ! ! ! ! !		
(Check if a		1 1 1 1 1	3 1 1 1 1 1 1 1		
is changed)	Newark CITY A			NJ 071 STATE ▲	02 ZIP CODE ▲
COMMITTEE'S E-MAI	_ ADDRESS				
(Check if ac is changed)	<u> </u>	apcompliance.c			
	Optional Seco	nd E-Mail Addres	s 	<u> </u>	
(Check if ac is changed)	PAGE ADDRESS (URL) dress http://www.boo	kerforsenate.com			
2. DATE 07	14 2014				
3. FEC IDENTIFICA	TION NUMBER >	C C0054	10500		
4. IS THIS STATEME	NEW (N)	OR	AMENDED (A)		
I certify that I have ex-	amined this Statement an	d to the best of r	ny knowledge and belief it is	s true, correct and	complete.
Type or Print Name of	Treasurer Scott-Kobler	JAH62	amore		
Signature of Treasurer	Scott Kobler	ide N	que :	Date 07	14 2014
NOTE: Submission of fa			subject the person signing thi SHOULD BE REPORTED WIT		penalties of 2 U.S.C. §437g.
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FEC Form 1 (Revised 02/2009)

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#### FORM 1S -STATEMENT OF ORGANIZATION (Supplemental Page)

FEC Form 1S (Revised	06/2011)		Page 5
Banks or Other Depositories safety deposit boxes or mainta Name of Bank, Depository, etc	ins funds.	ttee deposits funds	s, holds accounts, rents
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Mailing Address	<u> </u>		
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	<u> </u>	ا ليا	<u> </u>
	CITY 🚣	STATE 4	ZIP CODE 🛕
Name of Any Connected Org Secure Our Senate 20	anization, Affiliated Committee, Joint Fundraising Repu	resentative, or Lea	[ ADDITIONAL ] adership PAC Sponsor
Mailing Address	600 Pennsylvania Ave SE		
	Ste 210		
	Washington	DC	20003
Relationship:	CITY <b>≜</b>	STATE	ZIP CODE
Connected Organization	Affiliated Committee X Joint Fundraising Repre	esentative Le	eadership PAC Sponsor
Designated Agent			[ADDITIONAL]
Full Name	<del></del>		
Mailing Address			
Title or Position ●	CITY &	STATE	ZIP CODE
	Telephone	e number	
Joint Fundraiser Participant			[ADDITIONAL]
	FEC	D number C	

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FEC Form 1S (Revised	06/2011)		Page 6
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Name of Any Connected Org	ganization, Affillated Committee, Joint Fundraising Rep	resentative, or Lead	[ ADDITIONAL ]
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Mailing Address	600 Pennsylvania Ave SE		
	Ste 210	<u> </u>	
	Washington	ا لئا ل	20003
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Connected Organization	Affiliated Committee X Joint Fundraising Rep	resentative Lea	adership PAC Sponsor
Designated Agent			[ADDITIONAL]
Full Name			1.
Mailing Address	·		
Title or Position ●	CITY &	STATE	ZIP CODE A
	<b>-</b>	<del></del>	3351 -
	Telepho	ne number	
Joint Fundralser Participant			[ADDITIONAL]
سيبيبي	FEC	C ID number C	

PREPARER

### United States Senate

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